

2015 Smile Guide :)

Your Preferred Dental Organization Member Handbook & Dentist Directory

For active employees & retirees



**PARTNERS
FOR HEALTH**

Dental made simple.



State of Tennessee

 **DELTA DENTAL**[®]

Dental made simple.

Thank you for enrolling in the State of Tennessee's Preferred Dental Option (PDO) Dental Plan. Delta Dental of Tennessee is proud to administer this plan and we want to help you make the most of your benefits.

This plan is open to you, your spouse and eligible dependents under the age of 26. Review a copy of the *State of Tennessee Eligibility and Enrollment Guide* to see if your dependents are eligible. You can get a copy of this guide from your agency benefits coordinator.

A brighter smile. A healthy mouth. Insurance against the unexpected. These are all great reasons to sign up for the PDO plan from Delta Dental of Tennessee.

We want to make your dental benefits easy to use and easy to understand. The following pages outline the PDO plan. If you have any questions, we are here to help. For more information, check out your exclusive website at www.DeltaDentalTN.com/stateTN, or give us a call at **(800) 223-3104**.

Your Delta Dental benefits, at your fingertips!



Download the Delta Dental Mobile App for Apple iOS or Android.

Features include:

- ▶ Find a dentist
- ▶ Mobile ID card
- ▶ Toothbrush Timer

Scan this QR code or go to http://delivr.com/2c9vx_qr to link to the App Store or Google Play Store. You will need a QR code reader to scan the QR code.

Your Benefits, 24/7



Our secure, online Consumer Toolkit allows you to:

- ▶ Check benefit eligibility
- ▶ Print an ID card
- ▶ Find current benefit information
- ▶ Review claims
- ▶ And more!

Go to www.DeltaDentalTN.com and log in under "Toolkits & Resources." Click on "New User" to register the first time.

No Surprises!



Want to know how much a procedure will cost? Want to make sure a service is covered under your plan? Request a **predetermination** (also called a "pre-estimate").

Your dentist can send a request to us, and we'll let him or her know if a service is covered, how much it may cost, and what you may have to pay. These amounts may not be exact, but they will give you a good idea of what to expect.

Find a Dentist



Choosing a dentist from the Delta Dental PPOSM network will help you save money and get the most from your benefits. You also have the option to visit any licensed dentist.

Go to www.DeltaDentalTN.com and click on "Find a Dentist."

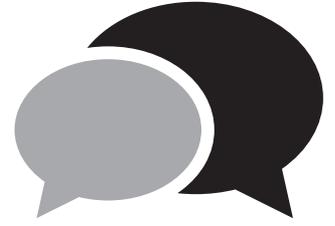
Keep it simple.

Choose a PPO Network Dentist.



- ▶ **No paperwork!** Your dentist fills out all forms and files claims for you.
- ▶ **No extra charges!** You're only responsible for your deductible and/or co-insurance charges.
- ▶ **No Balance Billing!** You'll never have to pay more than our Maximum Allowed Fees for services.
- ▶ **No waiting for reimbursement!** You'll never have to pay full price at the time of a dental visit.

Frequently Asked Questions



What does my plan cover or not cover?

Review your Certificate of Coverage at www.DeltaDentalTN.com/stateTN to learn more.

Do I need an ID card?

Actually, you don't! Your dentist can verify your eligibility any time by using the Dental Office Toolkit (DOT) or by calling us at (800) 223-3104. You'll need to tell your dentist your social security number or your member ID number.

Do I have to submit claims?

If you choose a dentist in our networks, all claims are handled by your dentist. If you visit an out-of-network dentist, you may need to submit your claim to:

Delta Dental of Tennessee
240 Venture Circle
Nashville, TN 37228

What is “balance billing”?

The dentists in the Delta Dental PPOSM network have agreed to accept a maximum fee for covered services called the Maximum Plan Allowance (MPA). PPO network dentists agree to accept the MPA as full payment and will not bill you for any fees above the MPA.

Dentists outside the PPO network have not agreed to the maximum fees. You may have to pay the difference between what the dentist charges and what Delta Dental will pay. This is balance billing. You will also have to pay your deductible and/or co-insurance.

Delta Dental “Safety Net”— You will always save the most money by visiting a dentist in the Delta Dental PPO network. As a Delta Dental member, you also have the option to see a Delta Dental Premier[®] dentist. Premier dentists have also agreed to the MPA (although it may be higher than the MPA for PPO dentists), so you will not be balance billed like you would at a non-network dentist.

To find out if your dentist is in the Delta Dental networks, contact your dentist's office or visit our website at www.DeltaDentalTN.com/stateTN.

Do you coordinate benefits with other dental carriers?

Yes. If you are covered by two or more dental plans—usually because both you and your spouse receive coverage through work—your coverage will be coordinated. Your benefits will be handled by your “primary carrier,” or the one that lists your name as the primary member. Benefits will also be coordinated for your dependents that are covered under your plan and are also covered under another dental plan.

The goal of coordinating benefits is to make sure the cost of the dental procedure is covered within the scope of the plans, without exceeding the amount of the actual bill.

For children covered by both parents' (or guardians') dental plans, the primary carrier is determined by the “birthday rule.” The plan that covers the parent or guardian whose birthday comes first in the calendar year will be considered the primary carrier.

What is an EOB (Explanation of Benefits)?

After you visit the dentist, you should get a document explaining what benefits you received at your last visit and what procedures were or were not covered. This isn't a bill, but it lets you know there may be one coming from your dentist. If you don't receive an EOB, you probably don't owe anything. An EOB will also tell you if your benefits have been coordinated with another plan and how much of your annual maximum has been used.

You can log into the Consumer Toolkit to see all of your EOBs, and you can also sign up to only receive EOBs electronically.

Looking for more answers?

Go to www.DeltaDentalTN.com/stateTN

While this brochure highlights some of the features of the PDO plan, this is not a Certificate of Coverage (COC). You will receive (or have already received if currently enrolled) a COC that has complete details about your dental plan. You may also review the COC online at www.DeltaDentalTN.com/stateTN.

Benefit Summary

State of Tennessee's PDO Option Plan

ACTIVE EMPLOYEE RATES	RETIREE RATES	Delta Dental PPO Network Benefits	Out of Network Benefits
Employee Only \$21.51	Retiree Only \$27.77		
Employee + Spouse \$40.69	Retiree + Spouse \$52.54		
Employee + Child(ren) . . \$49.46	Retiree + Child(ren) . . \$63.86		
Employee + Family \$79.62	Retiree + Family \$102.80		
Calendar Year Maximum amount per person per year for all expenses from in-network and out-of-network providers combined.		\$1500	
Lifetime Orthodontics Maximum amount per person per lifetime for all expenses from in-network and out-of-network providers combined.		\$1250	
Annual Deductible Deductible does not apply to Diagnostic and Preventive Services		No Deductibles	\$100 Per Person \$300 Per Family
Diagnostic and Preventive Services <ul style="list-style-type: none"> • Oral examinations – 2 in a calendar year • Prophylaxis (cleanings) – 2 in a calendar year • Bitewing x-rays – 1 set in 2 years for adults; 18 months for ages 12 to 18; a calendar year for ages less than 12. • Sealants to age 17 • Fluoride treatment to age 14 • Space maintainers to age 14 • Evidence-based benefits (up to 4 cleanings per calendar year for certain members with high-risk health conditions) 		100%*	80%*
Basic Services <ul style="list-style-type: none"> • Restorative (fillings) • X-rays • Simple extractions 		80%*	60%*
Major Services <ul style="list-style-type: none"> • Denture repair • Denture rebase & reline • Endodontics (root canal therapy) • Oral surgery (extractions including surgical removal of teeth) • Periodontics (treatment of gums and bones supporting teeth) • Implants 12-month waiting period • Bridges (fixed and removable) 12-month waiting period • Partial dentures 12-month waiting period • Full dentures 12-month waiting period • Crowns and cast restorations 12-month waiting period 		50%*	50%*
Orthodontic Services 12-month waiting period <ul style="list-style-type: none"> • For dependents to age 19 		50%*	50%*

Waiting Periods: Waiting periods begin on your effective date.

***Maximum Plan Allowance (MPA)**—You are not responsible for charges exceeding the MPA if you go to a participating Delta Dental PPOSM dentist. You are responsible for charges exceeding the MPA if you go to a non-participating dentist. The MPA charges are based on fees charged in your geographic area.

If you drop your coverage while eligible, you cannot re-enroll in the plan until the next annual enrollment period following 12 consecutive months without coverage, unless you have a life status change.